

9mobile

Mobile Number Portability

Customer Porting Request Form – Personal

Please Complete in CAPITAL letters, either in Blue or Black Ink.



Surname.....Other Names.....

Address.....

Email (If Applicable).....

Sex.....Mother’s Maiden Name.....State of Origin.....

ID Card Type.....ID Card Number.....

S/N	Mobile Number To be Ported	Current Operator	9mobile SIM Serial Number	Current Account		New Account Type		Time Validation SMS Sent	9mobile Product/Package
				Prepaid	Postpaid	Prepaid	Postpaid		
1									
2									
3									
4									

Customer Declaration: I declare that the information given is correct, and I am appointing 9mobile to close my account with the donor operator and to port my number, and that;

1	I am the current subscriber of the number(s) to be ported.	Yes <input type="checkbox"/> No <input type="checkbox"/>
2	I understand that all messages in the existing voice mailbox(es) and any undelivered SMS and MMS messages may be lost.	Yes <input type="checkbox"/> No <input type="checkbox"/>
3	I understand that the new services available from 9mobile will depend on the services available in the package options I subscribe to with 9mobile .	Yes <input type="checkbox"/> No <input type="checkbox"/>
4	Any configuration information from my existing account(s) will not be transferred to the new account.	Yes <input type="checkbox"/> No <input type="checkbox"/>
5	I confirm that my existing SIM/Number(s) has been registered with the donor operator.	Yes <input type="checkbox"/> No <input type="checkbox"/>
6	I understand that I will be responsible for recovering all outstanding mobile money account balances with donor operator.	Yes <input type="checkbox"/> No <input type="checkbox"/>
7	I understand that any unused prepaid credit with the donor operator will be lost.	Yes <input type="checkbox"/> No <input type="checkbox"/>
8	I understand that I will have to pay any early termination charges due to donor operator.	Yes <input type="checkbox"/> No <input type="checkbox"/>
9	I understand that I will have to pay the donor operator any subscription and call charges until the account is closed.	Yes <input type="checkbox"/> No <input type="checkbox"/>

Customer Signature/Thumbprint.....Date.....

For Official Use Only

I confirm that I have checked the customer ID and retained a copy captured the customer’s facial image.

Experience Centre.....

Date – Validation SMS Sent.....

Retail Advisor.....Signature.....